



**PENALTY WAIVER FORM
WATER/SEWER BILLS**

PART 1 (To be completed by person requesting waiver)

I _____, request that the penalty incurred on
my water/sewer bill for the billing period of _____, be waived.

ACCOUNT NUMBER: _____

BILLING NAME: _____

METER ADDRESS: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

SIGNATURE: _____ DATE: _____

PART 2 (To be completed by the Village)

1. Has the payment history for the past 2 years been reviewed? ____ NO ____ YES
2. Have there been any late payments? ____ NO ____ YES
3. If "yes", date of late payment (s): _____
4. Request Decision (include staff initials)
 - a. APPROVED _____
 - b. DENIED _____
 - c. DATE _____

*If the request has been denied, the penalty charges incurred will appear on the next
regular bill as arrears.*